



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 4994

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/750,184	12/31/2003	424	1648	ARC-1001USCON1
RULE				
APPLICANTS Richard L. Franklin, London, UNITED KINGDOM;			Please correct inventorship to include Johan R. de Faire of Vattholma, Sweden, John Kay of Radyr, Cardiff, United Kingdom, and Ragnvald Lindblom of Muong Rayong 21150, Thailand as per the Oath submitted on 12/31/03	
** CONTINUING DATA ***** This application is a CON of 09/549,642 04/14/2000 ABN which is a DIV of 09/303,375 04/30/1999 ABN which is a DIV of 08/600,273 02/08/1996 PAT 5,958,406 which is a CIP of 08/486,820 06/07/1995 PAT 6,030,612 which is a CIP of 08/385,540 02/08/1995 PAT 5,945,102 which is a CIP of 08/338,501 11/22/1994 ABN which is a CON of PCT/SE93/00455 05/21/1993				
** FOREIGN APPLICATIONS ***** SWEDEN 9201628-6 05/22/1992				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/05/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and <u>/ZACHARIAH LUCAS/</u> Acknowledged <u>Examiner's Signature</u>		<input type="checkbox"/> Met after Allowance <u>Initials</u>		STATE OR COUNTRY UNITED KINGDOM
		SHEETS DRAWINGS 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS KNOBLE, YOSHIDA & DUNLEAVY EIGHT PENN CENTER SUITE 1350, 1628 JOHN F KENNEDY BLVD PHILADELPHIA, PA 19103 UNITED STATES				
TITLE Removing dental plaque with krill enzymes				
FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	